

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	EMEBET		04-04-01
O.I.P.E. CLASSIFIER		8	04/26/01
FORMALITY REVIEW	K	1019	06-01-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	1/2/01
2	2/7/01
3	2/7/01
4	2/7/01
5	2/7/01
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8	2/7/01
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49	2/7/01
50	2/7/01

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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